

Glasgow. The aeroplane accomplished the journey from Islay to the landing ground on the outskirts of Glasgow in thirty-six minutes. The time occupied by the rail and steamship services is over eight hours. In view of this very material saving in time, the County Council of Argyll have been asked by the Department of Health for Scotland to consider the question of providing facilities for the transport by air of patients from outlying districts who may be urgently requiring hospital treatment. The mountainous nature of the country presents some difficulty in the way of finding suitable landing places. On one occasion when a sick man was being taken from Glasgow to North Uist it was impossible to discover a landing place. Several attempts were made to land in fields near the man's home, and, ultimately, it was decided to land on a stretch of sand some distance from the patient's house. The landing was made safely, but then commenced a race with the tide which was rapidly advancing. The stretcher-bearers carried the patient to his home, and, after seeing him in bed, hurried back to the plane just in time to take off before the waves swept over the spot where the machine had been standing.

Prof. Thomas J. Mackie, Professor of Bacteriology in the University of Edinburgh, has been honoured by being appointed a Corresponding Member of the Royal Academy of Medicine of Rome. Professor Mackie, who was appointed to his present post in 1923, came to Edinburgh from South Africa, where he was Wernher-Beit Professor of Bacteriology in the University of Cape Town.

Prof. Thomas Kirkpatrick Monro, M.D., Regius Professor of Medicine in the University of Glasgow, has just published a volume entitled, "The Physician as Man of Letters, Science, and Action". The volume bears witness to the enormous amount of work which has been spent by Professor Monro in gathering together, from many sources, the doings of medical men who have become known for other reasons than their repute as doctors. The range of subjects dealt with bears eloquent testimony to the diversity of talent to be found in the members of the profession. The book will be of interest not only to medical men but to a wider public.

To illustrate the principle, and to remove a popular misconception to the contrary, that expense by itself is no bar to the supply of proper and sufficient medicines under the National Health Insurance Acts, a case is quoted in the annual report of the Drug Accounts Committee for Scotland in which an insured person received from May, 1929, to December, 1932, medicine to the value of £235. During the four years, the patient received insulin to the value of £112, and liver extract, which was also required, involved an expenditure to the Drug Fund of £120.

The London Letter

(From our own Correspondent)

"The exceptionally good health of the English people continues to be maintained." With these words Sir George Newman begins his conclusion to the Annual Report on the State of the Public Health for 1932. In view of the economic situation and the distress experienced in many areas this authoritative statement must come as a surprise, and it is certainly in conflict with many statements made by investigators approaching the matter by other channels, such as the "Save the Children Fund", which found more evidence of malnutrition than the present report would allow. The facts contained in the report, however, can only bear one interpretation, namely, that so far no markedly adverse affects are to be observed for the country as a whole. The infant mortality rate—accepted as a delicate index of communal well-being—continues its downward course and is actually a point lower than in 1931. The general death rates for different parts of the country do not show any aggregation in those areas where unemployment is most marked, and from this, together with reports from medical officers of health and special reports supplied by health insurance medical officers in different parts of the country, it is concluded that there is no medical evidence of any general increase in physical impairment, in sickness or in mortality, as a result of economic depression or unemployment. The first obvious question is how has this been possible? A visiting officer from the health division of the League of Nations summed it up recently by saying that the medical machinery was available for such an emergency and it was being used. School meals and extra milk for the school children must obviously play an important part in preventing malnutrition, for example. But the report is not by any means solely devoted to complacent satisfaction. There are risks in the future and on the social side there are the factors of deprivation, hardship, anxiety and mental strain. There is evident an undercurrent of forewarning of the possibility of risk of mental instability in the adult man and prolonged undernourishment in women and children. It is obvious that such dangers must be faced. To deal with the former an organization is springing up, known as the Grith Fyrd (Peace Army) Camps. One such camp in the New Forest is proving a great success. It consists of a community of fifty unmarried men who receive no wages, but sign on for 18 months of camp-life during which time they enjoy a very varied series of educative experiences. The financial side is well worked out and the whole scheme has a solid basis of great value.

There has recently been an important Canadian visitor to London in the shape of the film "Damaged Lives" which, it is understood, was produced in Canada under the auspices of the Canadian Social Hygiene Council. Exhibited at what used

to be one of the largest variety halls in the city, it has been attracting huge audiences. This is admittedly the first step in health propaganda—to get hold of an audience, and the next step is to get the necessary information “across”. Reports from those who have seen the film vary very much. It is certainly well produced, but there is still too much emotionalism about the whole subject, and too much stress is laid on the terrible end-results of syphilis. The lecture after the film, with moving diagrams, has much more to commend it, since to many members of the audience this probably represents the first instruction in matters of sex they have ever received from any competent source. In this respect it is disappointing to find that the latest edition of the special handbook on health education prepared for teachers and others by the Board of Education contains no reference to sex education. Mothercraft, but not motherhood, is to be included in the syllabus, and while some mention is made of general biology the obvious path of approach to sex problems is not explained. As long as ignorance of such matters is fostered in the young such films as those mentioned above will be necessary.

The British Association, meeting in Leicester, has produced its annual crop of sensations for the lay press. The medical profession can, however, be rightly proud of the high standard set by those members who have taken part in the proceedings. The President, Sir Gowland Hopkins, delivered a fascinating address on certain aspects of cell chemistry. Tracing the chemical structure of such substances as vitamin D, cestrin, and cancer-producing tar, he was able to show strikingly how molecular rearrangements of the sterols link together such apparently diverse disorders as rickets and malignant disease. Prof. E. D. Adrian spoke of the activity of nerve cells, dealing especially with the results of his recent striking investigations of the electrical changes in nerve tissue. Another interesting topic from the medical aspect was found in a paper in the section of psychology in the use of narcosis in the treatment of anæsthesia.

ALAN MONCRIEFF.

London.

GAUDENDUM CUM GAUDENTIBUS

As lute to lute in harmony attun'd,
Vibrates in glad response, as though it shar'd
The joy that thrills the other's waken'd strings;
So let thine heart responsive share the joy
Thy neighbour feels; nor look with sullen eye
On eyes where gladness beams. Learn thou from this
To share in the delight which others feel,
And banish rankling envy from thy breast
When fortune smiles upon thy fellow man.
Learn thou from this no less his grief to soothe
With brotherly response; for just as joy
Gains increase more from that which it bestows,
So grief grows less, lull'd by the soothing tones
Of Pity's kind compassion for her woes.—Richard Pigot.

Abstracts from Current Literature

Medicine

The Clinical Significance of the Systolic Murmur. A Study of 1,000 Consecutive “Non-cardiac” Cases. Freeman, A. R. and Levine, S. A., *Ann. Int. Med.*, 1933, 6: 1371.

These authors undertook to determine the frequency with which systolic murmurs were present in the routine examination of a large and unselected group of patients, and to analyse conditions under which they were found. Cases in the medical wards were included in the study to only a small extent. Murmurs were graded according to intensity. A murmur of grade one intensity is the faintest bruit that can be definitely heard. It must have appreciable duration after the first heart sound, and is not to be confused with a prolonged first sound. A murmur of grade two intensity corresponds to what the general physician would term a faint systolic murmur. Twenty per cent of the patients studied proved to have systolic murmurs of grades one and two.

The murmur was twice as common in females as in males. It was least common in males between 20 and 49 years of age. In males over 19 years of age the murmur occurred more frequently at the apex than at the base of the heart, while in females, and in males under 19, the reverse held true. On the whole, murmurs were most common and loudest at the base of the heart, with the patient recumbent, and least common and faintest at the apex with the patient upright. Systolic murmurs appearing at the base of the heart during held expiration, and those appearing after effort, when not present before the test, the authors believe to be of absolutely no significance.

Of the 196 patients who had murmurs of this mild degree, 40 had hypertension, 13 had a red cell count under 3.5 million, 9 had hyperthyroidism, 12 had a definite past history of acute rheumatic fever or chorea, and 16 had a suspicious history of a previous rheumatic state. There were 12 with a past history of scarlet fever. The authors believe that all the above factors may have some relation to the murmurs present. There were 18 cases with definite organic heart disease. There were 19 cases over 50 years of age in which none of the above factors except age, were present. In some of these, no doubt, cardio-vascular disease existed but had escaped detection. In 29 patients it was possible that tertiary syphilis, leukæmia, displaced heart, etc., had a bearing on the production of the murmur. There remained, however, 45 patients with a systolic murmur, in whom not even these additional factors were present. Most of these murmurs were of grade one, and the majority were present at the base of the heart in females. These murmurs can